## REST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

101.0070-02000

CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 3)  CLAIMS  REMAINING  REMAINING  AFTER  AMENDMENT  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 4)  (Column 5)  (Column 6)  (Column 7)  (Column 7)  (Column 8)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 8)  (Column 1)  (Column 9)  (Column 1)  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  (Column 1)  (Column 2)  (Column 3)  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  Total  ADDIT FEE  OR  X\$18=  OR  ADDIT FEE  ADDIT FEE  OR  X\$18=  OR  TOTAL  OR  ADDIT FEE  OR  TOTAL  ADI	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CHARGEABLE CLAIMS	TOTAL CLAIMS			45					RATE	FEE		RATE	FEE	
NDEPENDENT CLAIMS   3   minus 3	FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
### ADDITIONAL FEE    Column 1	TOTAL CHARGEABLE CLAIMS			45 minus 20=		* 25			X\$ 9=		OR	X\$18=	450	
Total   Column 1   Column 2   Column 3   Column 3   FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   Column 2   Column 3   Column 3   FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   Column 2   Column 3   FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   Column 2   Column 3   FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   FIRST PRESENTATION OF MULTIPLE	INDEPENDENT CLAIMS			<u> 3.</u> mii	nus 3 =	* Ø			X42=		OR	X84=		
CLAIMS AS AMENDED - PART II	MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=			+280=		
Column 1	* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	:	TOTAL		OR	TOTAL	1190	
REMAINING AFTER AMENDMENT	( •							<u>_</u> .						
FIRST PRESENTATION OF MULTIPLE DEPENDENT-CLAIM	ENT A		REMAINING AFTER		NUM PREVIO	BER OUSLY			RATE	TIONAL		RATE	TIONAL	
FIRST PRESENTATION OF MULTIPLE DEPENDENCE LAIM	NON	Total	* 32	Minus	35	<u> </u>	= 2		X\$ 9=		OR	X\$18=	360	
FIRST PRESENTATION OF MULTIPLE DEPENDENCE LAIM	AME	·					=	1	X42=		OR	X84=		
Column 1)		FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	FCLAIM	<u> </u>	J	+140=			+280=		
Column 1   Column 2   Column 3									TOTAL			TOTAL		
RATE   ADDI-   Total			(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE			ADDIT. FEE	3	
+140	AMENDMENT B		CLAIMS REMAINING AFTER		HIGH NUM PREVI	HEST IBER OUSLY	PRESENT		RATE	TIONAL		RATE	TIONAL	
+140		Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
+140			<u></u>			T CL AIM			X42=		OR	X84=		
(Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AMENDMENT  Total  * Minus  ***    Column 2) (Column 3)    Column 3)   Column 3)   Column 3)   Column 3)   Column 3)   Column 3)   Column 2) (Column 3)   Column 3)	L	THOTTHEOL	THATION OF MI	JETH LE DE	LINDLIN	OBAIN		٤	+140=		OR	+280=		
CLAIMS REMAINING AFTER AMENDMENT  Total  * Minus  ***    PRESENT EXTRA   PRESENT EXTRA								•			OR			
REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR Total * Minus *** = X\$ 9= OR X\$18= OR X\$42= OR X\$42=				_			(Column 3)	<b>L</b>						
Total   *   Minus   **   =	AMENDMENT C		REMAINING AFTER		NUM PREVI	IBER OUSLY			RATE	TIONAL		RATE	TIONAL	
Independent * Minus *** = X42= OR X84=		Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		Independent	*	Minus	***		=-		X42=		OB.	X84=		
		FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		J	-					
* If the entry in column 1 is less than the entry in column 2 write "0" in column 3											OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														